

HEALTH OVERVIEW AND SCRUTINY COMMITTEE: 5 JUNE 2019

REPORT OF LEICESTERSHIRE PARTNERSHIP NHS TRUST

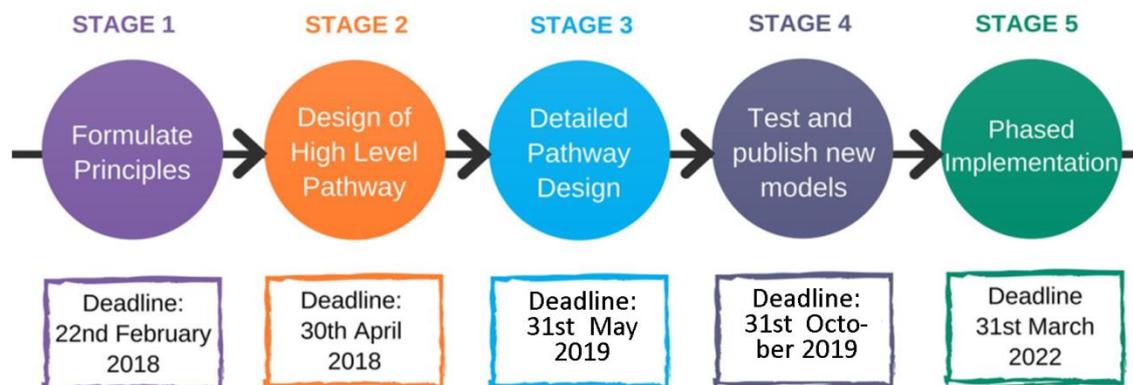
ALL AGE TRANSFORMATION PROGRAMME

Purpose of report

1. The purpose of this report is to update the Committee on the All Age Transformation Programme which Leicestershire Partnership NHS Trust have been undertaking.

Background

2. The all age transformation programme was initiated by the Sustainability, Transformation partnership in 2017. It was set out to adopt a similar approach to Northumberland, Tyne and Wear Foundation Trust (rated outstanding by the CQC) in undertaking transformational change of Leicestershire Partnership Trust's mental health and learning disabilities services.
3. The programme has been organised over 5 stages depicted below and is coming to the end of stage 3. This staged approach builds the change in layers in recognition of the complexity and extent of change expected.



Design features

4. The design work to date has led to the following design features each one focused on increasing the value added to service users, better utilising staff time to provide that value added input and making the system work better to reduce delays and disruptions in care.

- A common approach to care
- Four broad and distinct specialities (CAMHS, AMH, MHSOP, LD)
- Additional Expertise and Support Process
- Professional lead / care coordinators and 'team around the service user'
- Central Access Point
- All age crisis assessment
- New initial assessment approach for adults, older people and individuals with LD
- New intervention pathways
- Geographically alignment of services
- Peer support workers
- Supporting other needs framework
- Single Integrated Care Plan
- Step-up capacity

5. Workshops have been held in April and May to design the structural changes to services to best meet these key features. This is being pulled together with a detailed analysis of the workforce needed to deliver the key features to form a complete first draft model at the end of May 2019.

Next steps and implementation

6. There are various quality improvement projects that have been running concurrently to the design work, focusing on various elements of CQC findings and service issues. These are focused on undertaken change at pace on areas including environmental improvements, waiting times, adherence to policies and governance. Wherever relevant the immediate changes have been informed by the outputs of the Transformation design whilst being delivered through parallel processes.
7. There are elements of the key features that have started to be implemented which include:
- the commencement of a training and recruitment programme for peer support workers
 - the commencement of the 'supporting other needs' framework
 - delivery of recovery cafés to increase the focus in clinical practice upon principles of mental health recovery which underpin our new approach to care
8. From June to end of October the wider elements of the design features will be tested for ability to meet demand, viability and affordability. This will be undertaken in conjunction with commissioners and external experts. The model will be revised if necessary. After confirmation of affordability and viability, the proposed changes will be taken forward with further public engagement.
9. At the end of October 2019, any further alterations from the engagement will be made and the model finalised. Implementation will then be undertaken in a phased and careful way to ensure a balance between pace and putting change into practice well.

Circulation under the Local Issues Alert Procedure

Not applicable.

Officer to Contact

John Edwards
Associate Director for Transformation
Leicestershire Partnership NHS Trust
Email: MHLDTtransformationteam@leicspart.nhs.uk

Tel: 0116 2255791

List of Appendices

Draft Key design features document.

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